

## FORM 8. Entry of Appearance

## UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT

ADJUSTACAM, LLC v. NEWEGG INC.

No. 13-1665, -1666, -1667

## ENTRY OF APPEARANCE

(INSTRUCTIONS: Counsel should refer to Federal Circuit Rule 47.3. Pro se petitioners and appellants should read paragraphs 1 and 18 of the Guide for Pro Se Petitioners and Appellants. File this form with the clerk within 14 days of the date of docketing and serve a copy of it on the principal attorney for each party.)

Please enter my appearance (select one):

☐ Pro Se☒ As counsel for:

SAKAR INTERNATIONAL, INC.

Name of party

I am, or the party I represent is (select one):

☐ Petitioner☐ Respondent☐ Amicus curiae☒ Cross Appellant☐ Appellant☐ Appellee☐ Intervenor

As amicus curiae or intervenor, this party supports (select one):

☐ Petitioner or appellant☐ Respondent or appellee

My address and telephone are:

Name:

EZRA SUTTON

Law firm:

EZRA SUTTON &amp; ASSOCIATES

Address:

900 RT 9 NORTH

City, State and ZIP:

WOODBRIIDGE NJ 07095

Telephone:

732-634-3520

Fax #:

732-634-3511

E-mail address:

esutton@ezrasutton.com

Statement to be completed by counsel only (select one):

☒

I am the principal attorney for this party in this case and will accept all service for the party. I agree to inform all other counsel in this case of the matters served upon me.

☐

I am replacing \_\_\_\_\_ as the principal attorney who will/will not remain on the case. [Government attorneys only.]

☐

I am not the principal attorney for this party in this case.

Date admitted to Federal Circuit bar (counsel only): 1982

This is my first appearance before the United States Court of Appeals for the Federal Circuit (counsel only):

☐ Yes☒ No

☐ A courtroom accessible to the handicapped is required if oral argument is scheduled.

09/23/14  
DateEzra Sutton  
Signature of pro se or counsel

cc: \_\_\_\_\_

FORM 30. Certificate of Service

UNITED STATES COURT OF APPEALS  
FOR THE FEDERAL CIRCUIT

CERTIFICATE OF SERVICE

I certify that I served a copy on counsel of record on  
by:

September 23, 2014

- ☐ US mail  
☐ Fax  
☐ Hand  
☒ Electronic Means  
(by email or CM/ECF)

EZRA SUTTON

Name of Counsel

/s/ Ezra Sutton

Signature of Counsel

Law Firm

EZRA SUTTON & ASSOCIATES

Address

900 RT 9 NORTH

City, State, ZIP

WOODBIDGE, NJ 07095

Telephone Number

732-634-3520

FAX Number

732-634-3511

E-mail Address

esutton@ezrasutton.com

NOTE: For attorneys filing documents electronically, the name of the filer under whose log-in and password a document is submitted must be preceded by an "/s/" and typed in the space where the signature would otherwise appear. Graphic and other electronic signatures are discouraged.